

HAND DELIVERED

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED

2014 JUN -2 PM 3:32
Office Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5 FEC MAIL CENTER

F r i e n d s o f L e n a r

ADDRESS (number and street)

P . O . B o x 6 6 1 5 2

☐

(Check if address
is changed)

W a s h i n g t o n

CITY ▲

D C

STATE ▲

2 0 0 3 5 -

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐

(Check if address
is changed)

d a v i d . s a t t e r f i e l d @ a r e n t f o x . c o m

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

w w w . l e n a r w h i t n e y . c o m

2. DATE

MM / DD / YYYY
0 6 / 0 2 / 2 0 1 4

3. FEC IDENTIFICATION NUMBER ►

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer David Satterfield

Signature of Treasurer

David Satterfield

Date

MM / DD / YYYY
6 / 2 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)